

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MLH</i>		<i>11/24/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>30</i>	<i>67369</i>	<i>02-16-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	8/26/03
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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41	✓
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48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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